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JUN 23 2005**FACSIMILE TRANSMISSION****To:** USPTO**From:** Elaine Sale**Fax #** 703-872-9306**Pages:** 11 (Incl. cover)**Ph #****Date:** June 23, 2005**Re:** US 10/047,072 (Atty Docket: MER011CT)**CC:**☐ **Urgent** ☐ **Per your request** ☐ **For review** ☐ **Please comment** ☐ **Reply requested**

- **Comments:** Response to Office Action
- Fax cover sheet (1 page)
- Amendment Transmittal Form (2 pages)
- Amendment (8 pages)

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Attorney Docket No.: MER011CT

PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re: Steinman et al.
 Application No.: 10/047,072
 Filed: January 15, 2002
 For: *Method and Compositions for Obtaining Mature Dendritic Cells*

Group Art Unit: 1644
 Confirmation No.: 7452
 Examiner: Gerald R. Ewoldt

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JUN 23 2005

Date: June 23, 2005

Via Facsimile to: 703-872-9306
 Commissioner for Patents
 P.O. Box 1450
 Alexandria, VA 22313-1450

Sir:

Transmitted herewith is an AMENDMENT in the above-identified patent application.

- ☐ Applicant claims small entity status. See 37 CFR §1.27.
☒ No additional fee is required.
☐ The fee has been calculated as shown below:

(COL. 1)		(COL. 2)	(COL. 3)	SMALL ENTITY		OTHER THAN A SMALL ENTITY	
	Claims Remaining After Amendment	Highest Number Previously Paid For	Present Extra	RATE	ADDIT. FEE	OR RATE	ADDIT. FEE
Total	9	20	= 0	x 25=	\$ 0	x 50=	\$ 0
Indep	1	3	= 0	x100=	\$ 0	x 200=	\$ 0
<input type="checkbox"/> FIRST PRESENTATION OF MULTIPLE DEP. CLAIM				+180=	\$ 0	+360=	\$ 0
				Total Add. Fee	\$ 0	OR Total	\$ 0

- * If the entry in Col. 1 is less than the entry in Col. 2, write "0" in Col. 3.
 ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.
 *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space. The "Highest Number Previously Paid For" (Total or Independent) is the highest number found from the equivalent box in Col. 1 of a prior Amendment or the number of claims originally filed.

Attorney Docket No.: MER011CT
Application No.: 10/047,072
Filed: January 15, 2002
Page 2

- ☐ Please charge my Deposit Account No. 50-3187 in the amount of \$_____.
- ☐ A check in the amount \$_____ to cover _____ is enclosed.
- ☒ The Commissioner is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 50-3187.
- ☒ Any additional filing fees required under 37 C.F.R. § 1.16 for the presentation of extra claims.
- ☒ Any patent application processing fees under 37 C.F.R. § 1.17.

Respectfully submitted,

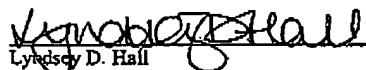


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CERTIFICATE OF MAILING UNDER 37 C.F.R. § 1.8

I hereby certify that this correspondence is being facsimile transmitted to the United States Postal Service Patent Technology Center 1600 (Fax Number: 703-872-9306) on June 23, 2005.


Lyndsey D. Hall

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Application No. 10/047,072 Art Unit: 1644
Applicant: Steinman *et al.* Examiner: G. R. Ewoldt
Date Filed: January 15, 2002 Conf. No. 7452
Docket No. MER011CT Cust. No. 43852
Title: METHOD AND COMPOSITIONS FOR OBTAINING MATURE
DENDRITIC CELLS

CERTIFICATION UNDER 37 CFR § 1.8

I hereby certify that this correspondence is being facsimile transmitted to the United States Patent and Trademark Office (Fax. No. 703-872-9306) on the date set forth below.

June 23, 2005

Date of Signature and Facsimile


Lyndsey Hall

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

AMENDMENT UNDER 37 C.F.R. §1.111

Dear Sir:

In response to the Office Action dated *March 23, 2005* (hereinafter "Office Action"), please reconsider the above-identified application (hereinafter "Application") in light of the following remarks:

Listing of the Claims are reflected in the listing of claims which begins on *page 2* of this paper.

Remarks begin on *page 4* of this paper.